SUMMARY SHEET Form (RF-3)

			08/01/14 NB
Change in	Company's premium or rate level produ	iced by rate revision effective:	10/01/14 RN
Program:	Allied Program		
	(1)	(2)	(3)
		Annual Premium	Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1	Automobile Liability		
	Private Passenger	\$14,115,738	0.00%
	Commercial		
2	Automobile Physical Damage		
	Private Passenger	\$1,273,174	-0.30%
	Commercial		
3	Liability Other Than Auto	· · · · · · · · · · · · · · · · · · ·	
4	Burglary and Theft		
5	Glass		
6	Fidelity		
7	Surety		
8	Boiler and Machinery		
9	Fire		
10	Extended Coverage		
11	Inland Marine		
12	Homeowners		
13	Commercial Multi-Peril		
14	Crop Hail		
15	Other		-
oes filin	g only apply to certain territory/terr	itories or certain classes? If so is	necify.
	gapplies to the various classes in fo		p. c. c. y .
_	123,317,320	nowing territories.	
Brief des	cription of filing. (If filing follows rat	tes of an advisory organization, s	pecify organization):
	/Class factors were decreased for C	· -	, ,
:	* Adjusted to reflect all prior rate ch	nanges	
*:	* Change in Company's premium lev	vel which will	
	result from application of new rat	es.	
		America	n Alliance Casualty Co.
			ame of Company
			·
		C	helly McClaskey

Vice President Underwriting

SUMMARY SHEET Form (RF-3)

ange in	Company's premium or rate level produ	read by rate revision offectives	09/01/14 RN
ogram:	Allied Program	aced by rate revision effective.	03/01/14 KN
ograiii.	(1)	(2)	(3)
	(1)	Annual Premium	Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
	Coverage	volume (mmois)	change (1 or 7
1	Automobile Liability		•
	Private Passenger	\$13,235,065	-2.05%
	Commercial		
2	Automobile Physical Damage		
	Private Passenger	\$2,221,369	0.00%
	Commercial		
3	Liability Other Than Auto		
4	Burglary and Theft		·
5	Glass		
6	Fidelity		
7	Surety		
8	Boiler and Machinery		
9	Fire		
10	Extended Coverage		
11	Inland Marine		
12	Homeowners		
13	Commercial Multi-Peril		· · · · · · · · · · · · · · · · · · ·
14	Crop Hail		
15	Other		
	g only apply to certain territory/teri applies to all territories	ritories or certain classes? If so, s	pecify:
). 11115	applies to all territories		
_			
iof doc	cription of filing. (If filing follows ra	tes of an advisory organization sr	ecify organization):
	factors for UM and Medical Payme		cerry organizations.
se race	Tuctors for Own and Micarda Faying	were decreased.	
	 Adjusted to reflect all prior rate cl 	nanges	
*	* Change in Company's premium le	vel which will	
	result from application of new rat	es.	
			Alliance Casualty Co.
		Na	me of Company
		Sh	elly McClaskey
			erwriting Manager

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private	9	
Passenger	11,415,234	0.0%
Commercial		
Automobile Physical Dama	ag	
Private Passenger	5,255,412	+3.2%
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		·
Other		
Line of Insurance		
	ertain territory (territories) or	certain
Classes? If so, specify: This	s filing applies only to certain luxury v	(chicles
Specify.	siming applies only to certain luxury v	remoies.
Brief description of filing.	(If filing follows rates of an a	dvisory
Organization, specify		,
organization):	Changes to the vehicle ac	djustment factor for some vehicle
,		
*Adjusted to reflect all prior		dt fram annliggtig a f
	remium level which will resu	it irom application of ne
rates.	Apollo Copuelly Co	omnany
	Apollo Casualty Co	ompany

Name of Company

Official - Title

Betty L. Werber, CPCU -- Product Manager

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **		
Automobile Liability Private				
Passenger	\$ 1,818,567	5.3%		
Commercial				
Automobile Physical Damag				
Private Passenger	\$ 1,083,213	4.5%		
Commercial				
Liability Other Than Auto				
Burglary and Theft		·		
Glass				
Fidelity				
Surety				
Boiler and Machinery				
Fire				
Extended Coverage		V-1		
Inland Marine				
Homeowners		······································		
Commercial Multi-Peril				
Crop Hail				
Other				
Life of Insurance				
Does filing only apply to certa Classes? If so,	in territory (territories) or	certain		
specify: No				
Specify.				
Brief description of filing. (If filing follows rates of an advisory				
Organization, specify	· ·	•		
organization):	Base rate changes, ch	nannel / affinity discount factor		
changes, capping of towing and lat	oor uses per policy term, char	nge to driver to vehicle		
assignment.				
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new				
rates.				
		nt Insurance Company		
		me of Company		
		CAS, MAAA, Director, Pricing		
		Official – Title		

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective $\frac{7/17/2014\;NB\;9/21/2014\;RNL}$.

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+ or -)**
1. Automobile Liability Private Passenger Commercial	2,514,923	26.8%
2. Automobile Physical Damage Private Passenger Commercial	1,975,226	4.1%
3. Liability Other Than Auto		
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain If so, specify: It does not apply to a ce		certain classes?
Brief description of filing. (If organization, specify organization)		ase rate, model year discount and our
* Adjusted to reflect all prior : ** Change in Company's premium le- result from application of new	vel which will	
	National General Insura	
	Name of Compar	ay .
	Lincoln Mitchell, Produc Official - Tit	
	OLLICIAL - Ili	TE

H29219D

SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective 06-27-14

	(1) Coverage	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>
	Coverage	volume (IIIIIIois)	Onlingo (· Or)
1.	Automobile Liability Private Passenger	\$2,644,638	+5.28%
	Commercial		
2.	Automobile Physical Damage Private Passenger	\$1,761,276	+1.04%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		<u></u>
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine	·	
12.	Homeowners		
13.			
14.	Crop Hail		
15.	Other		•
	Line of Insurance		
	es filing only apply to certain te	rritory (territories) or ce	rtain

classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

With this Illinois Quantum Automobile filing we are proposing changes to: Base Rates by coverage, MAF Table 29 - Quote to Effective Date, Rule 2, Rule 14, and the Capping Rule.

This change applies to policies issued on or after 06/27/2014 and effective on or after 09/05/2014.

- * Adjusted to reflect all prior rate changes.
- ** Changes in Company's premium level which will result from application of new rates.

Travelers Commercial Insurance Company

Name of Company

Sen m. Sury

Change in Company's premium or rate level produced by rate Revision effective 06-27-14

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial	\$38,727,559	+5.50%
2.	Automobile Physical Damage Private Passenger Commercial	\$23,872,043	+1.10%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

With this Illinois Quantum Automobile filing we are proposing changes to: Base Rates by coverage, MAF Table 29 - Quote to Effective Date, Rule 2, Rule 14, and the Capping Rule.

This change applies to policies issued on or after 06/27/2014 and effective on or after 09/05/2014.

- * Adjusted to reflect all prior rate changes.
- ** Changes in Company's premium level which will result from application of new rates.

The Travelers Home and Marine Insurance Company

Name of Company

Sere M. Ser Vice President

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company	y's premium or rate	level produced	by rate revision
effective 07/07/2014	•		•

- '	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
	Automobile Liability Private		- 3-1
	Passenger	11,587,336	+1.4%
	Commercial		
	Automobile Physical Damag		
	Private Passenger	8,515,699	+1.2%
	Commercial		481-461-461-461-461-461-461-461-461-461-46
	Liability Other Than Auto		
	Burglary and Theft		
	Glass	**************************************	
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail	**************************************	
	Other		
	Line of Insurance		
	Does filing only apply to certa Classes? If so	in territory (territories) or	certain
	·		
	specify: No	iling follows rates of an a	duioon
	specify: No Brief description of filing. (If fi	iling follows rates of an a	dvisory
	specify: No Brief description of filing. (If file Organization, specify	Ū	•
	specify: No Brief description of filing. (If file Organization, specify organization):	Ū	dvisory es, Flat Acquisition Load Base Rates
	specify: No Brief description of filing. (If file Organization, specify	Ū	•
	Brief description of filing. (If file Organization, specify organization): and Program Deviation Factors. *Adjusted to reflect all prior rates to the prior of t	We are revising Base Rate	es, Flat Acquisition Load Base Rates
	specify: No Brief description of filing. (If file Organization, specify organization): and Program Deviation Factors. *Adjusted to reflect all prior ra	We are revising Base Rate Ite changes. Ite which will resu	es, Flat Acquisition Load Base Rates It from application of new
	Brief description of filing. (If file Organization, specify organization): and Program Deviation Factors. *Adjusted to reflect all prior rates to the prior of t	We are revising Base Rate Ite changes. Ite which will resu 21st Century Cent	es, Flat Acquisition Load Base Rates It from application of new ennial Ins. Co.
	Brief description of filing. (If file Organization, specify organization): and Program Deviation Factors. *Adjusted to reflect all prior rates to the prior of t	We are revising Base Rate Ite changes. Ite	es, Flat Acquisition Load Base Rates It from application of new

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3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

| Change in Company's premium or ra | ate level produced by rate revision |
|-----------------------------------|-------------------------------------|
| effective 07/07/2014 | • |

| (1)
Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|--|--|------------------------------------|
| Automobile Liability Private | | - Change (*Ci) |
| Passenger | 1,099,905 | 5.8% |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | 869,633 | 2.0% |
| Commercial | | |
| Liability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | |
| Inland Marine | - | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other | | |
| Line of Insurance | | |
| Does filing only apply to certa Classes? If so, specify: No | nin territory (territories) or | certain |
| Brief description of filing. (If f | iling follows rates of an a | dvison |
| Organization, specify | ming rollows rates of all at | a visor y |
| organization): | We are revising our Base | Rates |
| , | | |
| | | |
| *Adjusted to reflect all prior ra
**Change in Company's premates. | | t from application of new |
| | 21st Century North A | merica Ins. Co Program 31 (50Tier) |
| | N.J. | |

Name of Company

Saeeda Behbahany - Regional Actuary
Official - Title

1.

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3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

| Change in Company's premium or ra | ate level produced by rate revision |
|-----------------------------------|-------------------------------------|
| effective 07/07/2014 | |

| (1) | (2)
Annual Premium | (3)
Percent | |
|---|-------------------------------|------------------------------------|--|
| Coverage | Volume (Illinois) * | Change (+or-) ** | |
| Automobile Liability Private | | | |
| Passenger | 365,186 | 6.1% | |
| Commercial | | | |
| Automobile Physical Damag | | | |
| Private Passenger | 302,725 | 1.9% | |
| Commercial | | | |
| Liability Other Than Auto | , | | |
| Burglary and Theft | | | |
| Glass | | | |
| Fidelity | | | |
| Surety | • | | |
| Boiler and Machinery | | | |
| Fire | • | | |
| Extended Coverage | | | |
| Inland Marine | | | |
| Homeowners | | | |
| Commercial Multi-Peril | | | |
| Crop Hail | * | | |
| Other | | | |
| Line of Insurance | | | |
| Does filing only apply to certa Classes? If so, | in territory (territories) or | certain | |
| specify: No | | | |
| | | | |
| Brief description of filing. (If f | iling follows rates of an ac | dvisorv | |
| Organization, specify | 9 | • | |
| organization): | We are revising our Base I | Rates | |
| · | | | |
| | | | |
| *Adjusted to reflect all prior rate changes. | | | |
| **Change in Company's prem | ium level which will resul | t from application of new | |
| rates. | | | |
| | | merica Ins. Co Program 33 (50Tier) | |
| | Nar | ne of Company | |

Saeeda Behbahany - Regional Actuary
Official - Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

| Change in Company's premium or rate le | evel produced by rate revision effective | 7/21/2014 |
|---|--|--|
| (1) | (2)
Annual Premium
Volume (Illinois)* | (3)
Percent
<u>Change (+ or -)**</u> |
| <u>Coverage</u> | volume (mimois) | Change (1 Or -) |
| Automobile Liability Private Passenger Commercial | <u> </u> | 0% |
| 2. Automobile Physical Damage
Private Passenger Commercial | \$2,913,781 | 0% |
| Liability Other Than Auto Burglary and Theft | | |
| 5. Glass6. Fidelity7. Surety | | |
| Boiler and Machinery Fire | | |
| 10. Extended Coverage 11. Inland Marine | | |
| 12. Homeowners13. Commercial Multi-Peril | | · · · · · · · · · · · · · · · · · · · |
| 14. Crop Hail 15. Other Line of Insurance | | |
| | | |
| Does filing only apply to certain territory | (territories) or certain classes? If so, specify: | No |
| In this filing, we are revising our Illinois rates. The Monthly 03NS and the Six Month discount and the quarterly discount and | rates of an advisory organization, specify o | Dairyland Auto" automobile program h the exception of term, paid in full continuing with two identical products |
| With this filing, we are: | | _ |
| Updating Base RatesUpdating Territory FactorsAdding a zip code | | |
| There are no other changes being made | elsewhere in our manual. | |
| | n our products pricing at an adequate and moure. The long-term success of this program of | |
| | | |
| *Adjusted to reflect all prior rate changes **Change in Company's premium level v | s.
which will result from application of new rates. | |
| | Viking Insurar
N | nce Company of Wisconsin |
| | | arbe - Product Manager |
| | | Official - Title |